OPEN PEER REVIEW

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As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

Advantages of "Open Peer Review" process

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- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://brieflands.com/briefland/knowledgebase/category/tree.html#opr.html

Asian Journal of Sports Medicine
Article DOI: 10.5812/asjsm.103813
Published in: Asian Journal of Sports Medicine: 12(2); e103813

Peer Review Report for "Tinea Gladiatorum Prevalence Among Wrestlers in the Era of Required Skin Inspection"

Author(s): Mark A. Berg, Michael Miner, William O Roberts

Review Timeline:

Submit Date: 29 Apr 2020
Revised Date: 1 Nov 2020
Accepted Date: 4 Nov 2020

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | Revision (0)

12 Jul 2020

Dear AE,
Thanks for this research
1- Keywords do not match with title and text.
2- In the method written 17 of the nineteen high schools agreed to participate BUT in the results written 544 athletes participated in the nineteen high schools.
Thanks

Hossein Zarrinfar: Reviewer | Revision (0)

15 Jul 2020

Dear AE,
In the manuscript entitled "Tinea gladiatorum prevalence among wrestlers in the era of required skin inspection" (ID: 103813).
The authors have described Tinea gladiatorum prevalence among wrestlers. This manuscript is interesting and educational. By the way, because of the low number of samples, it can be accepted as a Letter to editor only after revision.
It is a main question: how the authors could diagnose tinea gladiatorum (ringworm) via a

KOH examination too!

Moreover, there are some grammatical and spelling errors in English too that should be corrected by a person expert. Thus, it may need a minor revision.

1. Why did you missed the 5 wrestlers in the study!?
2. Please clarify these data more: “(17 to 22 wrestlers, 95% CI 1.8% - 6.0%)”.
3. Please add this sentence in beginning of “Background” about ringworm (dermatophytosis) with the related references:

“Dermatophytosis is a contagious skin infection that its prevalence can vary depending on different geographical areas.” “References a-c”

a. Identification of Dermatophytosis Agents in Mashhad, Iran, by Using Polymerase Chain Reaction Sequencing (PCR Sequencing) Method. Journal of Isfahan Medical School. 2019; 37(520):256-262.

b. Epidemiology of dermatophytosis in northeastern Iran; A subtropical region. Current Medical Mycology. 2019; 5(2): 16-21.

c. Low in vitro activity of sertaconazole against clinical isolates of dermatophyte. Current Medical Mycology. 2020; 6(1): 36-41.

4. Please state more information about diagnosis of ringworm via KOH examination in material and method section.
5. Please clarify these data more: “(3.3-4.3%, 95% CI 1.8% - 6.0%)”.
6. In result section add a table for summary results too.
7. The discussion need more discuss about tinea gladiatorum yet.

Thanks

REFEREE: Associate Editor | **Revision** (0) 17 Jul 2020

Dear EIC,

The manuscript is studied, and there are some comments which should be addressed by the author. According to the comments, the document needs major revision.

Kind regards,

REFEREE: EIC | **Revision** (0) 17 Jul 2020

Dear Authors,

Thank you for submitting your manuscript to Asian J Sports Med. Your manuscript has now been reviewed by two reviewers and an Associate Editor. I now have the reports of the Referees, which suggest that your manuscript might be suitable for publication following a number of revisions. I attach some reviewer comments and invite you to submit a revised version of your manuscript addressing the points made.

Thanks

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

July 29th, 2020

Dear editor & reviewers,

Thank you for your valuable input. We plan to incorporate the suggestions and resubmit our manuscript. The reviewers ask for clarification on the following points:

1) There were 19 high schools that had 544 wrestlers in our defined geographical area. We had consent and/or adequate monitoring at 17 of these high schools. The 17 high schools had 510 wrestlers.

2) 39 wrestlers developed a rash suspicious for tinea gladiatorum. 34 wrestlers were consented, sampled and diagnosed. 5 wrestlers were not diagnosed. (3 unable to be consented and 2 with samples inadequate for diagnosis)

3) Why direct microscopy for diagnosis?

I believe our study is unique because it is a true prevalence study that prospectively followed a defined geographical population at high risk for tinea infection over time. As such, there are limitations to following every wrestler and diagnosing every tinea suspicious rash that appears as I will detail below.

The 510 wrestlers underwent skin inspection at 12-14 competitions over 12 weeks. (7,000+ episodes where a rash suspicious for tinea gladiatorum could have been identified). Within the geographical area (in following 510 of the 544 potential wrestlers) we covered 93% of the skin inspections; not perfect but pretty good.

In addition, we attempted to consent, sample and obtain laboratory confirmed direct microscopy diagnosis by study staff for every suspicious rash identified. We used direct microscopy because it is an accurate test with high sensitivity. (As noted in the manuscript referenced by Review two: “The results of direct examination were positive for all (79 rashes that grew colonies on culture)”[1]).

Ultimately we found that 36% of the suspicious rashes were, in fact, not tinea. Studies that rely on visual diagnosis or do not control for the direct microscopy reading will be misleading. 150+ hours were spent on the sampling & specimen delivery to the dermatopathologist, as the suspicious rashes occurred sporadically throughout the 7,000+ inspection episodes over the 12 week season. I hoped to get all 38 wrestlers enrolled and their rash sampled within 24 hours, but again, 34 was pretty good.

I feel our manuscript provides valuable information to a clinician who cares for populations similar to ours. Prevalence is lower than previously reported, but still significant enough that tinea gladiatorum prevention, diagnostic methods and treatment awareness is warranted. Importantly, laboratory confirmation is needed for accurate diagnosis.

Mark A. Berg MD
Assistant Professor
University of Minnesota

1) Epidemiology of dermatophytosis in northeastern Iran; A subtropical region. Current Medical Mycology. 2019; 5(2): 16-21

OPEN PEER REVIEW

Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

Hossein Zarrinfar: Reviewer | **Revision** (1) 8 Sep 2020

Dear AE,
In the manuscript entitled "Tinea gladiatorum prevalence among wrestlers in the era of required skin inspection" (ID: 103813).
This manuscript is revised. By the way, it can be accepted as a Letter to the editor after revision again.
The main question has not been answered yet: how the authors could diagnose tinea gladiatorum (ringworm) via a KOH examination too! Laboratory results!
1. Please state more information about the diagnosis of ringworm via KOH examination in the material and method section.
2. In the result section add a table for summary results too.
Thanks

REFEREE: Reviewer | **Revision** (1) 8 Sep 2020

Dear AE,
The study is reviewed carefully. According to comments and revisions by the author, this manuscript is accepted.
Thanks

REFEREE: Associate Editor | **Revision** (1) 8 Sep 2020

Dear EIC,
I think by considering the reviewer's comments this manuscript has some typographical concerns and this format should be revised again.
Thanks

REFEREE: EIC | **Revision** (1) 8 Sep 2020

Dear Authors,
The second round of peer review of your manuscript is completed. I now have the reports of the Referees, which suggest that your manuscript needs more correction.
Thanks

OPEN PEER REVIEW

Revision (2)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

Oct 6th, 2020
Response to reviewers:

Thank you for the helpful suggestions. This document highlights the updates we made to our manuscript.

Reviewer One:
The main question has not been answered yet: how the authors could diagnose tinea gladiatorum (ringworm) via a KOH examination too! Laboratory results!

1. Please state more information about diagnosis of ringworm via KOH examination in material and method section.

More details of our “KOH microscopy” process was added in the methods section. We utilized KOH microscopy because it is an accurate test with high sensitivity.[1]

1) Epidemiology of dermatophytosis in northeastern Iran; A subtropical region. Current Medical Mycology. 2019; 5(2): 16-21

Added to methods:

"Direct microscopy was selected for tinea diagnosis because of it's high sensitivity.1The rashes' leading edge was gently scraped with a #15 blade to obtain a keratinocyte sample. The sample was fixed on a glass microscope slide. Chlorazol black stain, which combines chlorazol black E (stains tinea elements green), potassium hydroxide (breaks down non-tinea keratin and cells) and dimethylsulfoxide (accelerates the process), was applied. The slides were read by a board certified Dermatopathogist for the presence (positive result) or absence (negative result) of tinea gladiatorum.

1) Epidemiology of dermatophytosis in northeastern Iran; A subtropical region. Current Medical Mycology. 2019; 5(2): 16-21

2. In result section add a table for summary results too.

Table one was added to the results section.

Mark A. Berg MD

OPEN PEER REVIEW

Revision (2)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Associate Editor | **Revision** (2) 4 Nov 2020

Dear EIC,
I am pleased to inform that all the concerns of reviewers have been addressed.
Thanks

REFEREE: EIC | **Revision** (2) 4 Nov 2020

Dear Authors,
The third round of peer review of your manuscript has been completed, and I am pleased to inform you that your manuscript has now been accepted for publication in our journal.
Thanks